THIS PERMIT VOIDS PREVIOUS ISSUED 7-13-71

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 088793 PIN# 4710 39 1406 DATE

OWNER OR CONTRACTOR TERRY LEVAN PHONE: Business Home (704) 528-9353

ADDRESS 566 LAUREL COVE RD, ~~TR HARBOR GATE~~, STATESVILLE, NC 28677

LOCATION LAUREL COVE ROAD, TR HARBOR GATE, TL HARBOR WATCH, TL HIGH LAKE, LOT AT END ON LEFT

SUBDIVISION HARBOR WATCH BLOCK / SECTION I LOT 14 LOT AREA 0.794 ACRE SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.33 GPD/FT

Septic Tank: 1000 Gallons; STB 825 Date 6-21-00

Pump Tank: 1000 Gallons; PT 302 Date 11-11-00

Pump Make: HYDROMATIC Model WE40MI Serial No.

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 240

No Lines SIX Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth SAND 6"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: LOW PRESSURE PPBPS

Repair System Description: LOW PRESSURE PIPE

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 3 No. Employees

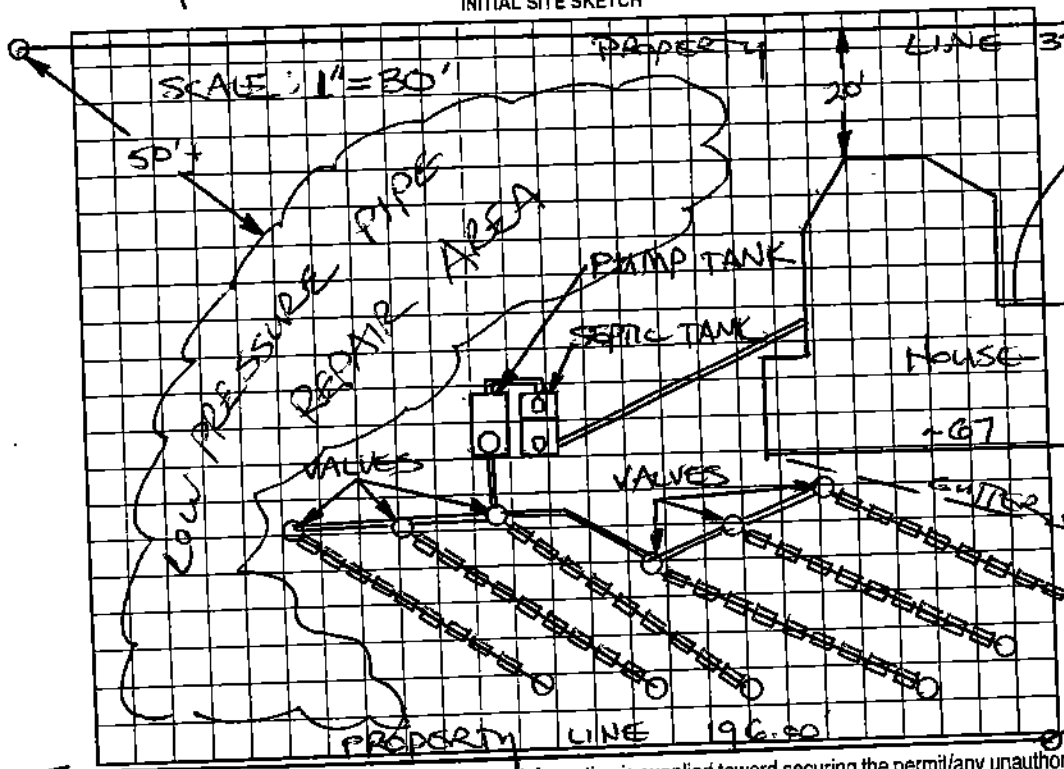
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

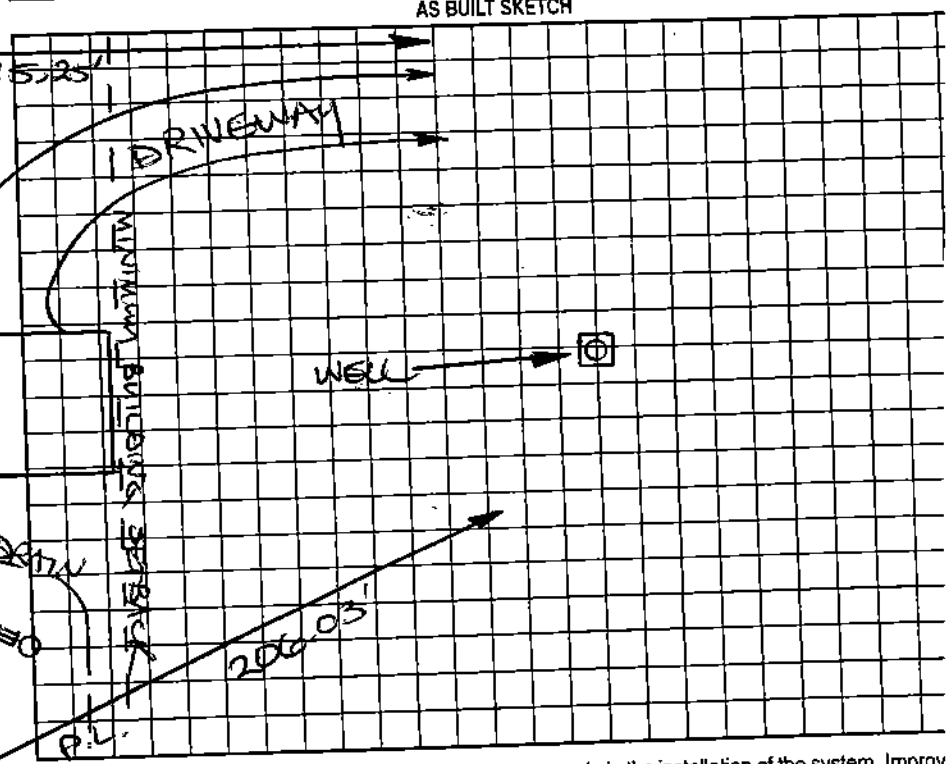
Comments/Conditions: ① INSTALL 54 PPBPS PANELS USING LOW-PRESSURE DISTRIBUTION AS SHOWN ② A CONTRACT SHALL BE EXECUTED BETWEEN SYSTEM OWNER & A MANAGEMENT ENTITY PRIOR TO ISSUANCE OF OPERATION PERMIT

Comments/Conditions: SYSTEM INSTALLED ACCORDING TO INITAL SITE SKETCH

INITIAL SITE SKETCH



AS BUILT SKETCH



Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improv

Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: _____ date 9-14-01 Installed by: C & W GRADING / JODY TRAVIS

Improvement Permit by: STEVE HEDRICK date 9-14-01 Operation Permit by: STEVE HEDRICK date 9-14-

Authorization to Construct by: STEVE HEDRICK date 9-14-01 Existing System Inspection by: _____ date 9-14-01

HEALTH DEPT COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK